Summer Village of Silver Beach
RR1 South, Site 1, PO Box 29
Thorsby, AB T0C 2P0
Phone: 780 389 4409
Fax: 780 401 3251
www.silverbeach.ca

The Inspections Group Inc.
12010 111 Avenue
Edmonton, AB T5G 0E6
Phone: 780 454 5048 Toll Free: 1 866 554 5048
Fax: 780 454 5222 Toll Free: 1 866 454 5222
www.inspectionsgroup.com

ELECTRICAL PERMIT APPLICATION FORM

Application Date: DD / MMM / YYYY **Estimated Project Completion Date:** DD / MMM / YYYY

Applicant Type: ☐ **Homeowner** ☐ **Contractor** **Cost of Installation (Labour & Material) $**

The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act. A permit may expire if the undertaking to which it applies: (a) is not commenced within 90 days of issue of the permit, (b) is suspended or abandoned for a period of 120 days. An extension can be considered when applied for in writing prior to permit expiry date.

Owner Name: Mailing Address:

City: Prov: Postal Code: Phone: Fax:

Cell: Email:

Owner's Signature / Declaration (Single Family Residential Only)
"I hereby declare I am the owner of the premises in which the work will be conducted, and reside or will reside on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations"

Company Name: Mailing Address:

City: Prov: Postal Code: Phone: Fax:

Cell: Email:

Master Electrician Number | Master Electrician Name | Master Electrician Signature

Project Location in the Summer Village of Silver Beach:

Street Address: Tax Roll #:

Legal Subdivision: Part of: Section: Township: Range: West of:

Subdivision Name: Lot: Block: Plan:

Directions:

BUILDING TYPE:
- ☐ Single / Multi Family Dwelling
- ☐ Commercial
- ☐ Residential
- ☐ Industrial
- ☐ Institutional

Square Feet:

TYPE OF WORK:
- ☐ New Work
- ☐ Renovation
- ☐ Connection
- ☐ Temporary Service
- ☐ Other

SERVICE INFORMATION:

Does this installation Require a Service Connection
☐ Yes ☐ No

SUPPLY SERVICE: ☐ Overhead ☐ Underground

Service Information: Amps:
Volts:
Phase:

Description of Work: Seasonal: ☐ Yes ☐ No

I the permit applicant understand and acknowledge the selected inspection stages will take place at my request. Any additional inspections requested may be charged at a rate of $150 per inspection (plus Levy).

(Applicant Signature)

ROUGH IN or **FINAL**
- ☐ Accept ☐ Accept ☐ Other:
- ☐ Decline ☐ Decline

***Homeowner applicants must select 2 stages of inspection**

Contractors may select only 1 inspection, additional selected inspections will be charged at $150/ Inspection (plus Levy)

Payment Type: ☐ Cash ☐ Cheque ☐ C/C Agreement ☐ Interac

Permit Fee: $

+ SCC Levy*: $

Total Cost: $ Receipt #:

*$4.50 or 4% of the permit fee maximum $560.00

TIGI OFFICE USE ONLY

Issuing Officer's Name:

Issuing Officer's Signature:

Designation Number:

Permit Issue Date: DD / MMM / YYYY

PLEASE CONTACT THE INSPECTIONS GROUP INC. PRIOR TO DRYWALL FOR INSPECTIONS ALLOWING 2 - 5 WORKING DAYS NOTICE AND PROVIDE SAFE ACCESS.

The personal information provided as part of this application is collected under the Safety Codes Act and the Municipal Government Act and in accordance with the Freedom of Information and Protection of Privacy Act. The information is required and will be used for issuing permits, safety codes compliance verification and monitoring, and property assessment purposes. The name of the permit holder and the nature of the permit is available to the public upon request. If you have any questions about the collection or use of the personal information provided, please contact the Municipality.